Correspondence

Br Heart J 1983; 50: 498

Sarcoid heart disease

Sir.

We wish to offer a brief follow up report on the case of sarcoid heart disease reported in your journal by Walsh¹ in 1978. The diagnosis was challenged by Johnson et al.² and defended by Walsh³ and Fleming⁴ in your correspondence columns.

The case was of a 36 year old man who presented in 1975 with a history of iritis and six months later, had general symptoms, arthalgia, congestive heart failure, and a variety of serious cardiac rhythm disorders which needed massive treatment. He developed pulmonary infiltration and hilar lymphadenopathy, and lymph node biopsy was positive for sarcoidosis. He was treated with large doses of corticosteroids and many other drugs for his rhythm disorders and congestive cardiac failure. He responded well, and in 1980 when his treatment and his condition appeared stable, he died suddenly.

Necropsy confirmed the diagnosis of extensive sarcoid heart disease with a fibrotic apical left ventricular aneurysm. Sarcoidosis was also present in the spleen, lungs, and lymph nodes. A detailed report of this case is being prepared, but we would like to emphasise⁵ that sarcoid heart disease should be diagnosed on reasonable clinical suspicion, as was done by Walsh.¹ Continued follow up of our large series of cases shows that in only a few of those accepted into the study has the diagnosis of sarcoidosis proved to be false at necropsy. Such cases will be the subject of a separate report.

The present follow up report is made possible by the study of Fleming and Bailey.⁵ This entailed the exchange of 22 letters about the case over four and a half years. Such persistence in obtaining detail is often necessary. The study now totals 250 cases. By continuing this study we hope that more information about the natural history and treatment of this difficult disease will be built up. The data and the experience already accumulated are widely used for reference.

All possible cases should be notified to Dr Hugh A Fleming, Papworth Hospital, Cambridge.

HA Fleming,
Papworth Hospital,
Cambridge.
JN McMahon, CF McCarthy, P Kelehan,
Regional Hospital,
Galway.

References

- 1 Walsh MJ. Systemic sarcoidosis with refractory ventricular tachycardia and heart failure. *Br Heart J* 1978; **40**: 931...3
- 2 Johnson NMcI, McNicol MW, Coltart DJ. Systemic sarcoidosis with refractory ventricular tachycardia and heart failure [Letter]. Br Heart J 1979; 42: 367.
- 3 Walsh MJ. Systemic sarcoidosis with refractory ventricular tachycardia and heart failure [Letter]. Br Heart J 1979; 42: 367-8.
- 4 Fleming HA. Sarcoid heart disease [Letter]. Br Heart J 1980; 43: 366.
- 5 Fleming HA, Bailey SM. Sarcoid heart disease—report of 197 United Kingdom cases with necropsy confirmation in 62. JR Coll Physicians Lond 1981; 15: 245-53.